User Guide to the External Quality Assurance Visit Report

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The External Quality Assurance Visit report

We want to ensure that our centres feel supported and confident when delivering our products. This guide offers an explanation of each of the main sections of the visit report. The external quality assurance visit report is the same for all our products.

We want to support you as much as possible to help you achieve Direct Claim Status which is granted if all regulations and standards are achieved and maintained.

Sections of the report

Section 1 : Centre Details
Section 2 : Previous Action Points
Section 3 : Management Systems & Administrative Arrangements
Section 4 : Resources
Section 5 : Assessment
Section 6 : Internal Quality Assurance
Section 7 : Sampled Learners
Section 8 : Learner Feedback
Section 9 : Action Plan for Centre
Section 10 : Action by External Quality Assurer/ Head Office
Section 11 : Additional Information Sheet
Section 12 : Centre Feedback

The grades used are:

- Excellent (no action required)
- Meets requirements (recommendation identified)
- Discrepancies within tolerance (action required)
- Requirements not met (significant action required)
- Unsatisfactory (immediate action required)
- Not Applicable

Each reference point is assessed and graded by the EQA accordingly considering the provided evidence and information.

We want our processes to be clear to customers so here you'll find out what is required to achieve grade 1s and DCS. The criteria within the report sections identify the systems/evidence that need to be in place to successfully administer the assessment and internal quality assurance requirements of our products.

If your report has grades other than 1 then section 9 of the report will offer an explanation followed by either an action point or a recommendation.

Direct Claim Status (DCS)

As your centre progresses, your reports are likely to require fewer actions. To encourage best practice, we offer a reward system called Direct Claim Status (DCS).

Please refer to our website for further details on the DCS Criteria.

When you achieve DCS you'll receive confirmation from us. You'll then be able to claim learner certificates without needing authorisation from your External Quality Assurer (EQA).

DCS is not available for our V Cert qualifications.

Remote External Quality Assurance

A remote EQA can be discusses as an alternative option for your centre and this will be agreed directly between you and your allocated EQA.

The remote EQA report will cover all the same sections as the visit report and will count towards DCS.

The Report Sections in Detail

Over the following pages we'll take a look at each section of the report.

You'll find the statements included in the report followed by an explanation below. These explanations detail what the EQA is looking for and each explanation has an example of evidence which could be presented to meet the action point or recommendation.

NB: These explanations are not intended to be exhaustive; there is more than one way to achieve a successful outcome so talk to your EQA about how you can move forward.

Section 1: Centre and NCFE Contact Details

External Quality Assurance

Monitoring Visit Report

Section 1: Centre Details and Our Contact Details

Centre Details	
Centre Number:	
Centre Name:	
Centre Address:	
Head of Centre	
Name:	
Email:	
Telephone:	
Product Contact	
Name:	
Email:	
Telephone:	
Product Number:	
Product Name:	
Actual Visit Date:	
Report amended on:	
Visit Duration:	
Session:	
DCS:	

Our Contact Details	
Customer Support Assistant	
Name:	
Email:	
Telephone:	
Business Development Account Manager	
Name:	
Email:	
Mobile:	
External Quality Assurer	
Name:	
Email:	
Mobile:	

Product Number	Product Name	Product Contact Name	Batches	DCS

Section 1 of the report holds all important contact details of our staff and EQA.

During the visit you should inform your EQA if there are any staff changes so they can pass this information to the head office to maintain the relevant contact details on our database.

Section 2: Previous Action Points

External Quality Assurance

Monitoring Visit Report

Section 2: Previous Action Plan

Has the centre carried out the actions agreed with the External Quality Assurer regarding:

	Fully actioned	Some action outstanding	No action taken	No action required
Management Systems and Administrative Arrangements				
Resources (Physical and Staff)				
Assessment				
Internal Quality Assurance				

Feedback to centre

Section 2 of the report is about the previous action plan. If this is your first visit then 'No action required' will be marked in the report column.

On your second visit, this section may form the starting point of discussions with your EQA and it will be an opportunity for you to present any evidence gathered since the last visit to meet any of the action points.

For the report to contribute to the DCS criteria there must be no ticks in the 'No actions taken' or 'Actions outstanding' columns.

Section 3: Management Systems and Administrative Arrangements

Section 3 is the first graded section of the report aiming at management and administration at the centre.

Setting up a course file is an opportunity to store all documentation relating to the delivery of our products. A central filing system will provide easy access to documentation that will be required for your visit. Your EQA will be able to offer advice on the typical content of a course file should you need help, and we also have guidance on our website.

External Quality Assurance

Monitoring Visit Report

Section 3: Management Systems and Administrative Arrangements

For information: Sections 3-6 are to be graded using the 6-point scale described below. The statements identify the systems/evidence centres have in place for the delivery, assessment and internal quality assurance of this product. Any actions identified will be highlighted in Section 9 of the report.

1 = Excellent (no action required)
2 = Meets requirements (recommendation identified)
3 = Discrepancies within tolerance (action required)
4 = Requirements Not Met (significant action required)
5 = Unsatisfactory (immediate action required)
6 = Not Applicable

		1	2	3	4	5	6
3.1	The centre's aims, policies and procedures in relation to the product are supported by senior management and understood by the assessment team						
3.2	There are procedures in place to ensure effective communication systems between all levels of staff and in all directions (including satellites, placements and staff who work remotely)						
3.3	Staff responsibilities, authorities and accountabilities of the assessment and internal quality assurance team across all assessment sites are clearly defined, allocated and understood						
3.4	Time is allocated for regular team meetings for all staff involved in the teaching, assessment and internal quality assurance of the product						
3.5	A staff induction and development process is in place for the assessment and internal quality assurance team						
3.6	There are documented policies including but not limited to appeals, complaints, health and safety, safeguarding, malpractice and plagiarism, conflicts of interest and diversity and equality						
3.7	The centre meets the proposed GLH within the specification (where appropriate)						
3.8	There are appropriate staff, resources and systems necessary to support the accumulation and transfer of credits, the recording of exemptions and						

3.9	Learner personal data is collected and held in accordance with the Data Protection Legislation, including the Data Protection Act 1998						
3.10	Marketing and advertising of the product(s) is clear, accurate and not misleading and where applicable, complies with our guidelines						
3.11	The centre has a robust registration and certification process in place and registers learners in a timely fashion to allow for external quality assurance to take place						
3.12	Learner claims for certification are correct and claims are valid						
3.13	Where product(s) have been written and developed by the centre, there is a robust process in place to ensure the content is fit for purpose						
3.14	Learner records and details of achievements are accurate, kept up to date and securely stored in line with our requirements and will be made available for external quality assurance visits and auditing						
3.15	There is a process in place for withdrawing product and learners from us						
3.16	The centre's achievements will be evaluated and reviewed and used to inform future product developmental activity						

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3.17	Feedback will be used to evaluate the quality and effectiveness of product provision against the centre's stated aims and policies, leading to continuous improvement						
3.18	Requests are complied with from us or the regulator for access to premises, records, information, learners and staff for the purpose of external quality assurance or other monitoring activities						

Statements

3.1 - The centre's aims, policies and procedures in relation to the product are supported by senior management and understood by the assessment team

Explanation

You're being asked to demonstrate that the product is supported by senior managers within your centre. It's important that senior management fully supports the delivery and they're able to offer help to those involved in the assessment and IQA of the product.

Senior management should have copies of the current product specification which can be found on our website.

Evidence to meet this point could include written confirmation of support from senior managers to run the product and a copy of your curriculum development plans. Other evidence could include policy documents highlighting who's responsible for management of assessment and internal quality assurance relating to the product.

3.2 - There are procedures in place to ensure effective communication systems between all levels of staff and in all directions (including satellites, placements and staff who work remotely)

Explanation

Staff meetings (face to face or remote), the use of email or telephone calls are all forms of effective communication systems. If it's difficult to bring staff together because they cover a wide geographical area, minutes of meetings should be shared and kept for review.

Its good practice to share EQA reports with all Internal Quality Assurers (IQAs) and Assessors associated with the product. If this doesn't happen, staff may develop different ways of working and learners could be disadvantaged through differing levels of assessment.

Evidence to meet this point could include minutes of team meetings, records of emails, feedback offered by remote staff, and completed course questionnaires covering specific problem areas

(rather than a ‘blanket’ approach using a general questionnaire). Any changes to course delivery need to be shared with all involved and recorded as being received.

3.3 - Staff responsibilities, authorities and accountabilities of the assessment and internal quality assurance team across all assessment sites are clearly defined, allocated and understood.

Explanation

All staff involved in the internal quality assurance and assessment process must be familiar with the assessment criteria stated in our product specifications. Staff allocated to the course delivery should understand their role in the assessment process.

The management role includes acting as the quality assurance link in the assessment process by making sure that appropriate staff are allocated to the product and that they’re sufficiently competent to assess the course.

Evidence to meet this element could include copies of your staff development policy and evidence of its implementation. It may also be relevant to show copies of staff CPD records. Organisational charts are also useful in explaining the various departmental roles.

3.4 - Time is allocated for regular team meetings and standardisations for all staff involved in the teaching, assessment and internal quality assurance of the product

Explanation

The main aim of team meetings is to promote good practice within your team and to ensure you have a standardised approach to assessment and internal quality assurance of learners’ evidence which is consistent with the assessment criteria set for each product. If it’s difficult to hold regular team meetings, evidence should be collected to demonstrate that standardisation is taking place and relevant information is being shared with all staff involved with the product.

Evidence to meet this point could include records/minutes of meetings, briefings and/or updates, schedule of activity for staff involved.

3.5 - A staff induction and development process is in place for the assessment and internal quality assurance team

Explanation

All staff associated with the product need to be familiar with it and the current product specification. It’s good practice to hold an induction session for all Assessors and IQAs and to ensure that all staff are given a copy of the product specification so they are familiar with the units and assessment criteria.

Staff new to assessment could be supported by more experienced staff or by attending an NCFE Assessor and IQA training event which are held throughout the year. Further details on events can be found on our website.

Evidence to meet this point could be an induction schedule or checklist indicating policies and procedures provided to staff. Remember that the IQA needs to take responsibility for their Assessors and offer support as and when required.

3.6 - There are documented policies including but not limited to appeals, complaints, health and safety, safeguarding, malpractice and plagiarism, conflicts of interest and diversity and equality

Explanation

Your course file should contain copies of all policies and procedures and there should be evidence to show how this information is given to learners. Policies may be given to learners during the induction process or provided on website for the learner to read at their convenience.

Evidence to meet this point will be copies of all policies and procedures and details of how and when these documents are provided to learners.

3.7 - The centre meets the proposed GLH within the specification (where appropriate)

Explanation

The GLH indicated in the product specification is the number of Tutor-led contact hours required to support learner achievement of a product. The TQT is the GLH plus any additional hours that a learner will spend working towards the achievement of a product as directed by – but not under the immediate guidance or supervision of – a Tutor.

Evidence to meet this point could include learner attendance records, schemes of work, induction records, assessment and IQA records.

3.8 - There are appropriate staff, resources and systems necessary to support the accumulation and transfer of credits, the recording of exemptions and Recognition of Prior Learning (if applicable)

Explanation

You need to have a tracking system in place to record any Recognition of Prior Learning (RPL), exemptions and transfer of credits for all learners. This needs to be functional and accurate.

Centres are responsible for deciding whether or not RPL can be accepted for a learner for part of or a full unit of a product. Centres could verify the learner's level of competence for the particular assessment criteria by checking their knowledge – eg via professional discussion – to ensure it's valid and current. Centres must also keep a record of their decision and evidence of the prior learning which must be presented to the EQA on the visit. All centre staff need to understand how to use RPL and its appropriateness for QCF and RQF qualifications.

Evidence to meet this point could include records of learner exemptions, records of learner credit transfers, records of exemptions, records of RPL claims, robust processes/facilities to validate claims for exemptions and RPL.

3.9 - Learner personal data is collected and held in accordance with the Data Protection Legislation, including the Data Protection Act 1998

Explanation

You need to ensure that any documents you use to record prior learning or transfer of credit comply with the Data Protection Act 1998. You can find details of the Data Protection Act at https://www.gov.uk/data-protection/the-data-protection-act you also need to ensure that learners are aware of any information you hold about them and how you will use it. Learners must give their consent to any information being held.

Evidence to support this could include your centre's data protection policy, and any forms your learners complete to give their consent to you holding their personal information.

3.10 - Marketing and advertising of the product(s) is clear, accurate and not misleading and, where applicable, complies with our guidelines

Explanation

The advertising, marketing and promotion of all our products must be adhering to the Branding guidelines and Stipulations of advertising for Unregulated products. The correct advertising must be implemented through all sites and materials. Any marketing or advertising materials that you use to promote the product, including pages on your website, must accurately reflect the details of the product being offered.

Evidence to support this could include copies of all relevant promotional materials and a demonstration of any webpages used to advertise the product.

3.11 - The centre has a robust registration and certification process in place and registers learners in a timely fashion to allow for external quality assurance to take place

Explanation

You need to ensure that you register your learners early enough in the academic session to allow your EQA to carry out sufficient external quality assurance to ensure the product is being delivered to the required standard, there are no discrepancies with the assessment criteria, staff are occupationally competent, and learner work meets the product's standards.

Evidence to support this could include copies of enrolment records, learner registration details, progress on the product, and estimated timescale for completion.

3.12 - Learner claims for certification are correct and claims are valid

Explanation

You must ensure that the information you provide when submitting learner claims for certification are accurate, eg the mandatory and optional units claimed for each learner are correct and valid. Claims should not be made without an EQA visit unless your centre has Direct Claim Status (DCS).

Evidence to support this could include assessment and IQA records, sampling plans, schemes of work, learner portfolios, achievement records and exams officer records.

3.13 - Where product(s) have been written and developed by the centre, there is a robust process in place to ensure the content is fit for purpose

Explanation

You should have processes in place to review your product on regular basis to ensure its validity, relevance, fit for purpose, etc.

Evidence to meet this point could include, evaluation forms, surveys, users charter, customer service statements. Product review process, development plan, meeting minutes, action plan to follow up surveys/meetings, dated and signed reviews, dedicated occupationally competent person to carry out the review of the product.

3.14 - Learner records and details of achievements are accurate, kept up to date and securely stored in line with our requirements and will be made available for external quality assurance visits and auditing.

Explanation

Assessors are advised to hold a central record of learner achievement for presentation to the EQA and centres should store these records securely.

Evidence to meet this point could include learner registration details, learner assessment records, evidence files or portfolios, security and access arrangements, assessment outcomes.

3.15 - There is a process in place for withdrawing products and learners from us

Explanation

The Centre must ensure that all learners registered on the product are working towards completion and should have a robust process in place to withdraw any learners who have left and are no longer continuing in a timely manner.

A Centre must have processes in place to notify us when they are no longer offering a product so our records can be updated. The Centre must ensure that all learners registered with us have the opportunity to complete the product.

Evidence to meet this point could be a process, plan, etc.

3.16 - The centre's achievements will be evaluated and reviewed and used to inform future centre product developmental activity

Explanation

The centre should evaluate the effectiveness of the delivery of the product, to ascertain what changes and improvements (if any) may be needed for future cohorts.

Evidence to meet this point could be an internal audit / self-assessment arrangements, record of findings against the approval criteria, evidence of corrective actions taken.

3.17 - Feedback will be used to evaluate the quality and effectiveness of product provision against the centre's stated aims and policies, leading to continuous improvement

Explanation

You should have processes in place to gather and review feedback from relevant sources (learners, staff, AOs) to ensure that delivery of the product is achieving your aims and policies and, where it isn't, address any issues.
Evidence to meet this point could be evaluation forms/surveys, users charter / customer service statements.

3.18 - Requests are complied with from us or the regulator for access to premises, records, information, learners and staff for the purpose of external quality assurance or other monitoring activities

Explanation

As part of your obligations under your centre agreement with us, you're required to provide us and the regulator with access to premises, records, information, learners and staff to help us carry out monitoring activities.

Evidence to meet this point could be data and information management systems, learner tracking systems, assessment and IQA records.

Section 4: Resources (Physical and Staff)

External Quality Assurance

Monitoring Visit Report

Section 4: Resources (Physical and Staff)

		1	2	3	4	5	6
4.1	The product is adequately staffed						
4.2	Assessors are occupationally competent and knowledgeable						
4.3	Internal Quality Assurers are occupationally competent and knowledgeable						
4.4	There is appropriate Continued Professional Development (CPD) provision for staff involved in the delivery of the product						
4.5	Equipment and accommodation used for the purposes of assessment comply with the requirements of relevant business legislation and product requirements						

Observations and feedback regarding resources

Statements

4.1 - The product is adequately staffed

Explanation

Centres must have sufficient staff working on the product to enable assessment and internal quality assurance to take place as highlighted in the product specification. We don't specify staff ratio numbers to learners as this is a centre decision. However, it's essential to have at least one Assessor and one IQA for the product.

It is possible to implement a system where Assessors and IQAs work across products and take on the different roles required. If in doubt, consult your EQA.

Evidence to meet this point should include copies of staff CVs and CPD together with copies of relevant certificates

4.2 - Assessors are occupationally competent

Explanation

Occupational competence requirements will vary depending on the product. The details of the occupational competence requirements for the product can be found in the product specification. Evidence to meet this point should include copies of staff CVs, certificates and CPD records.

4.3 - Internal Quality Assurers are occupationally competent

Explanation

The IQA must have sufficient skills to carry out internal quality assurance of Assessors' decisions, sample learner evidence and to ensure consistency and fairness in the assessment

decisions. An IQA is also responsible for supporting Assessors by offering advice and guidance and these skills need to be demonstrated to the EQA during a visit.
It's worth remembering that we also offer Assessor and IQA training for centre staff. Details can be found on our website. You're advised to book early as these training sessions are very popular.

Evidence to meet this point should include copies of staff CVs, certificates and CPD records, IQA feedback to Assessor.

4.4 - There is appropriate Continued Professional Development (CPD) provision for staff involved in the delivery of the product

Explanation

All staff involved with the course should be given access to training to enable them to maintain and update their skills as required in the product specification.

We don't specify amounts of time to be spent on staff development but any updates affecting the product should be accommodated as they take place. Staff development can also include keeping up to date with changes which are government driven and are highlighted on a range of websites. Sharing of good practice is also recommended.

Evidence to meet this point should include copy of your staff development programme records of training undertaken such as CPD records.

4.5 - Equipment and accommodation used for the purposes of assessment comply with the requirements of relevant business legislation and product requirements

Explanation

Relevant physical resources required to run your product can be found in the relevant product specification. It may also be useful to create a list of standard teaching materials used to deliver the product.

Evidence to meet this point could include a tour of your centre's facilities.

Section 5: Monitoring the Assessment Process

External Quality Assurance

Monitoring Visit Report

Section 5: Assessment

Assessor:	

		1	2	3	4	5	6
5.1	The assessment is mostly: 1 = at the main site, 2 = at a satellite centre, 3 = in the workplace, 4 = via distance learning, 5 = blended learning						
5.2	Assessors have full, up-to-date documentation						
5.3	There is a planned programme of delivery and assessment methods available for the product which meets our guidelines						
5.4	Information, advice and guidance about centre procedures and practices are provided to learners and potential learners						
5.5	Learners' development needs are matched against the requirements of the product and an agreed individual assessment plan established						
5.6	Learners have regular opportunities to review their progress and goals and to revise their assessment plan accordingly to meet their chosen product						
5.7	Any achievement for Recognised Prior Learning (RPL) has been recognised, recorded and checked for appropriateness (where applicable)						
5.8	Assessment methods used are valid and reliable and allow access to assessment for learners						
5.9	Assessment including any grading decisions have been applied in accordance with national standards as outlined in the specification						
5.10	Learners receive regular verbal and written feedback after assessment						
5.11	Each unit of assessed evidence is named, signed and dated by the Assessor and learner						
5.12	Assessment records show accurate assessment tracking, progress and achievement						
5.13	Adequate procedures exist to ensure secure and safe storage of current and completed learner assessment records and examination materials						
5.14	There are suitable arrangements to administer exams to ensure compliance with our external assessment regulations						

Observations and feedback regarding assessment

Statements

5.1 - The assessment is mostly - 1 = at the main site, 2 = at a satellite centre, 3 = in the workplace, 4 = via distance learning, 5 = blended learning

Explanation

The centre should inform the EQA of all locations where the course is being delivered to ensure they select a suitable sample of learner evidence. Your EQA will need to see evidence of a consistent approach to course delivery at all centres involved. They'll pick a sample of registered learners from a variety of locations where the course is being delivered.

Evidence to meet this point could include details of addresses, staffing and contact details for reference. It may also be the case that over time the EQA will wish to visit all centres where the course is delivered.

5.2 - Assessors have full, up-to-date NCFE documentation

Explanation

The EQA should ensure that all staff involved in the assessment process have the correct documentation. Copies of relevant publications can be found on our website. This is important to ensure a standardised approach to course delivery and assessment.

Evidence to meet this point could include records of induction meetings with staff including key documents for the Assessor and IQA to carry out their role.

5.3 - There is a planned programme of delivery and assessment methods available for the product which meets our guidelines

Explanation

Our product specification details the requirement for assessment, internal and external quality assurance for your course. As you'd expect, delivery and assessment of the course must be in line with our qualification specification and an example of course planning needs to be presented to your EQA during a visit.

Evidence to meet this point should include a planned programme of delivery such as a scheme of work, lesson plans, assessment plans and EQA sampling plans etc., details of any specialist materials used could be highlighted, IQA sampling plans should be available.

5.4 - Information, advice and guidance about the product procedures and practices are provided to learners and potential learners

Explanation

Information regarding relevant procedures and practices related to the product should be provided to learners as part of their induction. This information should also be accessible to learners and additional advice and guidance should be available.

Evidence to meet this point could include learner guidance and induction materials, details of support services available, appeals procedures, verbal confirmation by learners, if available.

5.5 - Learners' development needs are matched against the requirements of the product and an agreed individual assessment plan established

Explanation

Prior to enrolment, all learners should be subject to initial assessment to ascertain additional educational needs that may be required.

Evidence to meet this point could include learner initial assessment procedures, learner assessment plans, learner/trainee contracts.

5.6 - Learners have regular opportunities to review their progress and goals and to revise their assessment plan accordingly to meet their chosen product

Explanation

Learner's progress should be checked regularly to ensure they are working at the correct level/pace etc. Any issues should be addressed to reflect the learner's individual requirements.

Evidence to meet this point could include learner assessment plan, records of review meetings, examples of revisions to assessment plans, system to track learners' progress.

5.7 - Any achievement for Recognised Prior Learning (RPL) has been recognised, recorded and checked for appropriateness (where applicable)

Explanation

Any RPL needs to be clearly documented in the learner's portfolio and needs to be recognised during the internal quality assurance process. The IQA must ensure that the prior learning is valid, current and authentic. They also need to check the appropriateness and make sure it has been recorded correctly.

Centres must make it clear to the EQA that a learner's portfolio contains a record of RPL so they can include it in their sample.

Evidence to meet this point could include a central tracking document which records any RPL as well as being clearly referenced in the learner portfolio and internal quality assurance documentation.

5.8 - Assessment methods used are valid and reliable and allow access to assessment for learners.

Explanation

The assessment methods used allow the learner to produce evidence that is valid, reliable and clear and that sufficiently addresses the requirements of the product. Assessment methods should provide accessibility to learners with specific requirements.

Evidence to meet this point could include assessment plans and learner assessment records, provision for learners with particular assessment requirements.

5.9 – Assessment including any grading decisions have been applied in accordance with national standards as outline in the specification

Explanation

It's important that all Assessors base their assessments on the same product specification. If the product is graded it's important that the Assessors base their decision on the descriptors outlined in the product specification.

Standardisation meetings will highlight discrepancies in assessment decisions and should be a regular part of course management.

Evidence to meet this point could include assessment records and standardisation meeting minutes and may also be demonstrated during conversations with the assessment team.

5.10 - Learners receive regular verbal and written feedback after assessment

Explanation

The EQA will need to see that assessment has taken place. Even a simple tick can show the work has at least been read. If no annotations are made then generally the summative feedback should be more detailed.

Positive and constructive feedback should be given to each learner as the course progresses. It should contain enough detail to allow a learner to formulate a response. It is good practice to give the learner both verbal and written feedback.

Assessors should check with learners that they're happy to receive written feedback directly on their evidence and, if not, a separate feedback sheet could be used. A sample is available for download from our website or from your EQA.

Evidence to meet this point will be demonstrated to the EQA by copies of feedback sheets and assessment records.

5.11 - Each unit of assessed evidence is named, signed and dated by the Assessor and learner

Explanation

All assessment decisions should be signed and dated when work has been assessed. This shows a clear audit trail of progression and avoids end-loaded assessment.

The Assessors should agree dates with their IQA for when the different types of assessment will take place. This will show that course planning has been integrated into the delivery.

It's also good practice for Assessors to include constructive, written feedback to the learner throughout the course to aid the learning process and provide support to the learners.

Assessors are responsible for ensuring each learner's evidence meets the rules of currency, validity, reliability, authenticity and sufficiency. This is part of the quality assurance expected within a centre. Learners can confirm authenticity by signing and dating their evidence. This also shows that the assessment process has taken place throughout the course and not just at the end which is not considered good practice.

Evidence to meet this point will be demonstrated to the EQA by copies of feedback sheets and assessment records

5.12 - Assessment records show accurate assessment tracking, progress and achievement

Explanation

A system for tracking learner completion dates should be in place and kept up to date. This could be a spreadsheet recording all Assessors and learners on your course.

Learners should be encouraged to take ownership of their evidence and its presentation in a portfolio. Assessors are advised to keep an assessment completion record including brief details of the type of evidence produced by each learner against each unit.

Evidence to meet this point could include demonstration of assessment tracking system/spreadsheet, learner's Evidence Tracking Logs, assessment completion records.

5.13 - Adequate procedures exist to ensure secure and safe storage of current and completed learner assessment records and examination materials

Explanation

Assessors are advised to hold a central record of learner achievement for presentation to the EQA. Centres should provide secure storage facilities for these records. Our publication Regulations for the Conduct of External Assessment should be made available to all staff involved in the external assessment of the product. This document is available from our website.

Evidence to meet this point could include demonstration of storage arrangements to your EQA.

5.14 - There are suitable arrangements to administer exams to ensure compliance with our external assessment regulations

Explanation

You should have documented procedures to ensure all external assessments are carried out in adherence to our publication Regulations for the Conduct of External Assessment.

This document can be downloaded from our website and should be made available to all staff involved in the external assessment of the product.

Evidence to meet this point could include your documented external assessment procedures or demonstration of the procedures to the EQA.

NCFE

External Quality Assurance

Monitoring Visit Report

Section 6: Internal Quality Assurance

Internal Quality Assurer:	

		1	2	3	4	5	6
6.1	The Internal Quality Assurers are mostly: 1 = based at the main site, 2 = based at a satellite centre, 3 = freelance/home based.						
6.2	An appropriate IQA strategy and sampling plan is in place which is reviewed regularly and corrective measures implemented						
6.3	Suitable arrangements are in place to ensure adequate liaison, consistency and standardisation takes place across all sites including any satellite centres						
6.4	Allocation of Assessor responsibilities are clear and meet the needs of learners and Assessors						
6.5	Assessors have been provided with accurate advice and support to enable them to identify and meet their training and development needs						
6.6	Assessors have been assisted with arrangements for learners with special assessment requirements (where applicable)						
6.7	Assessors have been assisted in resolving disputes and appeals (where applicable)						
6.8	Assessors are provided with clear and constructive feedback on the use of different types of assessment methods, judgement of evidence and assessment decisions						
6.9	Assessment is internally quality assured, and each unit of internally quality assured evidence is named, signed and dated by the Internal Quality Assurer						
6.10	Sample dates are consistent with dates in the IQA sampling plans						
6.11	Up to date records of internal quality assurance and feedback to Assessors have been maintained						
6.12	Adequate time has been allocated to carry out internal quality assurance duties						

Observations and feedback regarding internal quality assurance

Statements

6.1 - The Internal Quality Assurers are mostly - 1 = based at the main, 2 = based at a satellite centre, 3 = freelance/home based

Explanation

The centre should inform the EQA of all locations where the product is being delivered to ensure they select a suitable sample of learner evidence. Your EQA will need to see evidence of a

consistent approach to course delivery and assessment at all centres involved. They'll pick a sample of registered learners from a variety of locations where the product is being delivered.

Evidence to meet this point could include details of addresses, staffing and contact details for reference. It will also be the case that over time the EQA will want to visit all centres where the product is being delivered.

6.2 - An appropriate IQA strategy and sampling plan is in place which is reviewed regularly and corrective measures implemented

Explanation

You should have a documented IQA strategy and sampling plan in place. This should be regularly reviewed to ensure it is effectively supporting the assessment process and, where it isn't, amended accordingly.

Evidence to meet this point could include IQA plans and reports, a sampling strategy and schedule of activity, records/minutes of assessment team meetings, internal reviews of sampling strategies, evidence of corrective actions taken.

6.3- Suitable arrangements have been made to ensure adequate liaison, consistency and standardisation takes place across all sites including any satellite centres

Explanation

It's essential that all staff have the chance to meet to discuss information related to the course. Standardisation meetings are really important and should take place throughout the year. The purpose of standardisation is to maintain consistency in the assessment practice and this can be achieved through sharing of learner evidence, exchanging teaching practices and agreement on assessment practices to be used.

Evidence to meet this point could include meeting agendas, minutes and records of attendance.

6.4 - Allocation of Assessor responsibilities is clear and meets the needs of learners and Assessors

Explanation

Centres must show that all Assessors and IQAs fully understand their roles and requirements of the course.

Evidence to meet this point could include organisational chart, records of all assessment sites and personnel, CVs of the assessment team, copies of job descriptions.

6.5 - Assessors have been provided with accurate advice and support to enable them to identify and meet their training and development needs

Explanation

IQAs must support the Assessor as this forms part of the centre quality assurance process. The IQA's feedback should help the Assessor identify any areas of improvement in their assessment practice. We offer Assessor and IQA Training so visit our website for more information.

Evidence to meet this point could include records of standardisation meetings and IQA feedback to Assessors. A sample feedback record to Assessors is available to download from our website.

6.6 - Assessors have been assisted with arrangements for learners with special assessment requirements (where applicable)

Explanation

Learners with special needs may benefit from extra tuition. A basic skills test will help to ensure learners are registered on the correct level of their course. IQAs should provide support to Assessors to ensure that assessment methods are appropriate to each learner's specific requirements.

Evidence to meet this point could include details of the curriculum offered and the support programme as well as records of initial assessments.

6.7 - Assessors have been assisted in resolving disputes and appeals (where applicable)

Explanation

The centre should have a documented appeals policy, outlining the steps that will be taken if learners dispute any assessment decisions. Assessors should be provided with support from IQAs in the event of any disputes. See the guidance document Appeals and Enquiries about Results for assistance.
Evidence to meet this point would include internal records of any disputes, centre appeals policy.

6.8 - Assessors are provided with clear and constructive feedback on the use of different types of assessment methods, judgement of evidence and assessment decisions

Explanation

The IQA should identify good practice and share it with Assessors to ensure consistency in assessment. The IQA must provide support and feedback to Assessors as part of the centre's quality control process.

Evidence to meet this point would include records of standardisation meetings and IQA feedback to Assessors.

6.9 - Assessment is internally quality assured, and each unit of internally quality assured evidence is named, signed and dated by the Internal Quality Assurer

Explanation

The EQA will need to see evidence that assessment has been internally quality assured. The IQA should review assessment decisions and feedback to learners and provide feedback to the

Assessor. This feedback should be documented, signed and dated by both the Assessor and IQA. Dates should correspond to the IQA sampling plan.
Evidence to meet this point would include records of feedback given by the IQA to the Assessors. It should be clear which comments are the Assessor's, so signatures and dates are essential. You can get example tracking documents from our website.

6.10- Sample dates are consistent with dates in the IQA sampling plans

Explanation

This point relates to the centre sampling plan, ie has the actual sampling followed the plan and been named, signed and dated. A matrix tracking system needs to be introduced to allow for the recording of planned and actual activities relating to the IQA process. An example of a sampling plan may be downloaded from our website.

Evidence to meet this point would include a spreadsheet which is held in the course file.

6.11 - Up to date records of internal quality assurance and feedback to Assessors have been maintained

Explanation

Records of internal quality assurance activity will be maintained in line with our requirements and will be made available for the purposes of external quality assurance.

Evidence to meet this point could include internal quality assurance plans and sampling records, minutes of assessment team meetings.

6.12 - Adequate time has been allocated to carry out internal quality assurance duties

Explanation

The IQA process must be carried out throughout the delivery and not at the end only. We don't state an amount of time to be spent on this; however, the EQA will need to see evidence of the process.

Evidence to meet this point could include IQA records.

Section 7: Sampled Learners

External Quality Assurance
Monitoring Visit Report

Section 7: Learners Sampled

Batch No.	Session	Status	Learner	Assessor	IQA	Units sampled

Reliability of Assessment:	

This section will be populated with learners from the sample list. Your EQA will choose the sample and let you know the learner names before the visit.

EQA will choose the sample based on the number of learners, Assessors and IQAs registered on the product as well as the factors such as delivery locations, methods of assessment, experience of Assessors and IQAs, status of the learners, etc.

Section 8: Learner Feedback

External Quality Assurance
Monitoring Visit Report

Section 8: Learner Feedback

Product Number and Name:	
How many learners have been spoken to as a part of the visit?	

Purpose – Has the product achieved its purpose for all learners interviewed?

Content – What did the learners interviewed think about the content of the product?

Support – Did all learners interviewed receive a reasonable and appropriate level of support?

Validity of Assessment – Were the learners able to provide evidence of knowledge and understanding to justify the outcome of assessments?

The EQA will want to speak to some of your learners at some point during the visit. This section will be used to record these discussions and all feedback will be part of the product evaluation and help our Development team to ensure the product is meeting its intended purpose.

Additional detail regarding the areas that will be discussed with your learners can be found in Appendix 1.

Section 9: Action Plan for Centre

External Quality Assurance

Monitoring Visit Report

Section 9: Action Plan for Centre	
Management Systems and Administrative Arrangements	
Action:	
Resources (Physical and Staff)	
Action:	
Assessment	
Action:	
Internal Quality Assurance	
Action:	
Action plan discussed and agreed with the centre?	YES / NO

This section will be populated from sections 3, 4, 5 and 6 for any statements graded a 2, 3, 4 or 5. If you receive one of these grades you'll receive an action point or a recommendation which will explain exactly what you need to do and will have an owner and a timescale. Recommendation is optional suggestions, however, an action is mandatory.

Your EQA should explain what will appear in this section before they leave the centre. Please ask about any areas you're unsure of during the EQA visit or audit and when you receive your report. Remember that the EQA is there to offer help and guidance throughout the whole process which includes support between visits.

Section 10: Action by External Quality Assurer/NCFE Head Office

External Quality Assurance
Monitoring Visit Report

Section 10: External Quality Assurer/Head Office

Action For	Action Required	By when
External Quality Assurer		
Head Office		

Do you recommend continued approval for this product?	YES / NO
Do you recommend continued approval for the centre?	YES / NO

This area of the report is designed to pass information such as support required by another team eg Business Development or Customer Support on to our head office.
It also records whether you may continue to deliver the product and continue to be our approved centre.

Section 11: Additional Information Sheet

External Quality Assurance
Monitoring Visit Report

Section 11: Additional Information Sheet

Any additional comments regarding the visit

This section will be used by your EQA to record any other information which doesn't fall under the previous sections of the report. This could include examples of good practice being demonstrated and any other comments in relation to the visit.

Section 12: Centre Feedback

External Quality Assurance

Monitoring Visit Report

Section 12: Centre Feedback

We really value centre feedback and this is a great opportunity for you to tell us what you think of the product. All feedback will inform the product evaluation and help our Product Development team ensure the product is meeting its intended purpose.

Product Number and Name:	

Do you think the product meets its intended purpose? If so, what 2 specific features did you like most about the product and if no, what prevented it from meeting its intended purpose?

Do you think the product meets the needs of you and your learner? Please explain how.

Do you agree that the number of hours we have assigned to Guided Learning and Total Qualification Time for this product are appropriate? If not, please explain your reason.

What are the typical progression routes for your learners after studying the product? Please be as specific as possible, including if the learners progress within the same subject area or different, progress to further study or employment.

What are your thoughts about the content and assessment of this product?

Do you intend to keep running this product? Please state your reasons for and against.

Is there anything we could do to make the product better? If so please give examples.

During the visit your EQA will give you the opportunity to provide feedback on the product. This section will be used to record this information which will be passed on to our Product Development team to ensure the product is meeting its intended purpose.

Appendix 1 – Learner Feedback – Additional Detail

Purpose – Has the product achieved its purpose for all learners interviewed?
By exploring this with learners, this helps to ensure we're meeting our obligations under Ofqual regulation E1.1; An awarding organisation must ensure that each qualification which it makes available or proposes to make available (a) has a clear objective in accordance with this condition, and (b) meets that objective.

Content – What did the learners interviewed think about the content of the product?
Exploring this with learners will allow us to obtain vital feedback to ensure that the content of our product is appropriate and fit for purpose. This contributes to our adherence to Ofqual regulations D1.1 (An awarding organisation must ensure that each qualification which it makes available is fit for purpose), D3.1 (An awarding organisation must keep under review, and must enhance where necessary, its approach to the development, delivery and award of qualifications, so as to assure itself that its approach remains at all times appropriate) and E9.4 (An awarding organisation must keep under review each level which it has assigned to a qualification or a Component of a qualification).

Support – Did all learners interviewed receive a reasonable and appropriate level of support?
In recognition of our duty of care to any learners registered with us, we need to ensure that those learners are receiving an appropriate level of support from our centres and that centres are adhering to section 9 of the centre agreement and maintaining sufficient resource to support their learners effectively. We also need to ensure that any materials that we provide or endorse are supporting learners in achievement of the requirements of the qualification.

Validity of Assessment – Were the learners able to provide evidence of knowledge and understanding to justify the outcome of assessments?
Exploring this area allows us to establish whether or not the assessment of the product is valid, ie on successful completion of the assessment, the learner can demonstrate the level of knowledge/understanding that the assessment was supposed to be assessing. If not, this raises questions over the validity of the assessment method. Furthermore, and in line with condition of recognition A8.1, exploring this area provides an opportunity to identify, and prevent, the occurrence of any malpractice or maladministration at the centre.